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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: Northern District of: Illinois | |
| (State) | Chapter you are filing under: |
| · · · · · · · · · · · · · · · · · · · | ✓ Chapter 7 Chapter 11 |
| | Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself | | |
|----|--|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Dominique | |
| | 100.10 | First name | First name |
| | Write the name that is on your government-issued | т | |
| | picture identification (for | Middle name | Middle name |
| | example, your driver's | Jones | |
| | license or passport | Last name | Last name |
| | Bring your picture | | |
| | identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| _ | | | |
| 2. | All other names you have used in the last | First name | First name |
| | 8 years | | |
| | - | Middle name | Middle name |
| | Include your married or maiden names. | | |
| | maiden names. | Last name | Last name |
| | | | |
| | | First name | First name |
| | | | |
| | | Middle name | Middle name |
| | | Last name | Last name |
| _ | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX- 4470 | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer | 9 xx - xx- | 9 xx - xx- |
| | Identification number (ITIN) | | |

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| D | ebtor 1 Dominique First Name | I Jones Middle Name Last Name | Case number (if known) |
|----|--|---|--|
| | | | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| | Identification Numbers (EIN) you have used in the last | Business name | Business name |
| | 8 years | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 7524 S Maryland Ave 2nd FL Number Street | Number Street |
| | | Chicago Illinois 60619 | |
| | | City State Zip Code | City State Zip Code |
| | | Cook County | County |
| | | • | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | Number Street |
| | | | |
| | | City State Zip Code | City State Zip Code |
| 6. | Why you are choosing this district | Check one: | Check one: |
| | to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

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| Debtor 1 Dominique | Т | | Case number (if known |) |
|---|--|--|---|---|
| First Name | Middle Name | Last Name | | |
| Part 2: Tell the Court Ab | oout Your Bankruptcy (| Case | | |
| The chapter of the Bankruptcy Code you are choosing to file under | | f description of each, see <i>Notice Req</i> i 10)). Also, go to the top of page 1 and | | |
| 8. How you will pay the fee | more details about cashier's check, of may pay with a creation of the cashier's check, of may pay with a creation of the cashier's check, of may pay with a creation of the cashier's cashier's cashier of the cashier o | It how you may pay. Typically, if your money order If your attorney is edit card or check with a pre-printer fee in installments. If you choose y Your Filing Fee in Installments (Corfee be waived (You may request not required to, waive your fee, any line that applies to your family significant or the property of the statement of the property of | ou are paying the f submitting your p ed address. e this option, sign official Form 103A) this option only if d may do so only if ze and you are una | |
| 9. Have you filed for bankruptcy within the last 8 years? | Yes. District District District | WhenWhenWhen | MM / DD / YYYY MM / DD / YYYY | case numbercase numbercase number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | V No. Yes. Debtor District Debtor District | <u>W</u> hen | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you rent your residence? | ✓ No. Got | dlord obtained an eviction judgment a to line 12. out <i>Initial Statement About an Eviction</i> bankruptcy petition. | | |

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Debtor 1 Dominique Jones Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have No. any property that $\overline{\mathbf{A}}$ Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1
 Dominique
 T
 Jones
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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| Debtor 1 Dominique | T Jones Middle Name Last N | | mber (if known) |
|---|--|---|--|
| First Name | | ıame | |
| | estions for Reporting Purposes 16a. Are your debts primarily cor "incurred by an individual prin No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily bus | nsumer debts? Consumer of marily for a personal, family siness debts? Business debts stment or through the operations. | ots are debts that you incurred to obtain ation of the business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that funds No. | | exempt property is excluded and administrative to unsecured creditors? |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 mill \$10,000,001-\$50 mill \$50,000,001-\$100 m \$100,000,001-\$500 | llion \$1,000,000,001-\$10 billion nillion \$10,000,000,001-\$50 billion |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 mill \$10,000,001-\$50 mi \$50,000,001-\$100 n \$100,000,001-\$500 | llion \$1,000,000,001-\$10 billion nillion \$10,000,000,001-\$50 billion |
| Part 7: Sign Below | | | |
| For you | correct. If I have chosen to file under Chapt of title 11, United States Code. I ur under Chapter 7. If no attorney represents me and I cout this document, I have obtained I request relief in accordance with t I understand making a false statem | ter 7, I am aware that I may penderstand the relief available did not pay or agree to pay so and read the notice require the chapter of title 11, Unite tent, concealing property, or | rjury that the information provided is true and proceed, if eligible, under Chapter 7, 11,12, or 13 e under each chapter, and I choose to proceed comeone who is not an attorney to help me fill d by 11 U.S.C. § 342(b). d States Code, specified in this petition. obtaining money or property by fraud in 50,000, or imprisonment for up to 20 years, or |
| | both. 18 U.S.C. §§ 152, 1341, 151 | 9, and 3571. | 55,555, or imprisorminant for up to 20 years, or |
| | /s/ Dominique Jones Signature of Debtor 1 | x | Signature of Debtor 2 |
| | Executed on 11/11/2017 MM / DD / Y | | Executed on |

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| Debtor 1 Dominique | T | Jones | Case number (if k | nown) |
|--|---------------------------|-----------------------|------------------------------|--|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed un | der Chapter 7, 11, 12 | 2, or 13 of title 11, United | ave informed the debtor(s) about I States Code, and have explained the so certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | uired by 11 U.S.C. § | 342(b) and, in a case in w | hich § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge afte | r an inquiry that the | information in the schedu | les filed with the petition is incorrect. |
| attorney, you do not | 4.0 | | | |
| need to file this page. | /s/ Michael Miller | | Date | 11/11/2017 |
| | Signature of Attorney | for Debtor | M | M / DD / YYYY |
| | | | | |
| | | | | |
| | Michael Miller | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 20 S. Clark Street | | | |
| | Street | | | |
| | 28th Floor | | | |
| | | | | |
| | Chicago | | Illinois | 60603 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | 3122568728 | Email address | mmiller@semradlaw.com |
| | | | _ | |
| | | | Illinois | |
| | Bar number | | State | |

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| Fill in this infor | mation to identify your ca | ase: | | |
|---------------------------|----------------------------|-------------|----------------------|---|
| Debtor 1 | Dominique | Т | Jones | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | , |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois | |
| Case number (If known) | | | (State) | |

| Check | if t | his | is | an |
|-------|------|-------|----|----|
| amend | ed | filir | ng | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|---|
| . Schedule A/B: Property (Official Form 106A/B) | #0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$16,249.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$16,249.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | \$0.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | ψο.σσ |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$87,433.60 |
| Your total liabilitie | \$87,433.60 |
| | <u> </u> |
| Summarina Vaur Income and Evenness | |
| Part 3: Summarize Your Income and Expenses | |
| . Schedule I: Your Income (Official Form 106I) | \$5,196.44 |
| Part 3: Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$5,196.44 |

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Debtor 1 Dominique Jones Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$4,776.62 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$19,751.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$19,751.00

9g. Total. Add lines 9a through 9f.

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| | | | | | | _ | | |
|-------------------------------------|-----------------------------|---|---|-----------------------|--|-------------------------|--|--|
| Fill in this | inform | ation to identify your ca | ase: | | | | | |
| Debtor 1 | | Dominique | Т | | Jones | | | |
| Debtor 2 | | First Name | Middle N | lame | Last Name | | | |
| (Spouse, if fi | ling) | First Name | Middle N | lame | Last Name | | | |
| United Sta | ates Bai | nkruptcy Court for the: | Northern | | District of Illinois | | | |
| | | .,, | | | (State) | | | |
| Case num (If known) | nber | | | | | | | |
| Officia | J Eo | rm 106A/B | | | | _ | | Check if this is an |
| | | | | | | | | amended filing |
| Sche | dule | A/B: Prope | rty | | | | | 12/1 |
| category responsib write your | where y le for s name | you think it fits best. B upplying correct inforr and case number (if k | e as complete a nation. If more s nown). Answer e | nd ac pace very | asset only once. If an asset fits in m curate as possible. If two married po is needed, attach a separate sheet t question. r Other Real Estate You Own or | eople are to this fo | e filing together, both a rm. On the top of any a | re equally |
| | | | • | | y residence, building, land, or similar | | | |
| √ | | o to Part 2 | | | , | p. op. | , | |
| H | Yes. V | here is the property? | | | | | | |
| | | | | Wha | at is the property? Check all that apply | /. | Do not deduct secured | claims or exemptions. Put |
| 1.1 | Stroot | address, if available, or o | other description | | Single-family home | | | red claims on Schedule D: nims Secured by Property. |
| | Sueer | audress, ii avaliable, or c | otilei description | | Duplex or multi-unit building | | Current value of the | Current value of the |
| | | | | | Condominium or cooperative | | entire property? | portion you own? |
| | | | | H | Manufactured or mobile home Land | | - | |
| | Numb | er Street | | = | Investment property | | Describe the nature o | |
| | | <u>.</u> | | Ħ | Timeshare | | interest (such as fee s the entireties, or a life | |
| | City | State | Zip Code | | Other | | | |
| | | | | Wh | o has an interest in the property? Ch | eck | Check if this is co (see instructions) | mmunity property |
| | | | | one | | | | |
| | | | | 닏 | Debtor 1 only | | | |
| | | | | \vdash | Debtor 2 only Debtor 1 and Debtor 2 only | | | |
| | | | | H | At least one of the debtors and another | | | |
| | | | | Oth | er information you wish to add abou | | m. such as local | |
| | | | | | perty identification number: | | | |
| If you | own o | r have more than one, lis | st here: | \A/le | at in the munerature Chank all that apply | | Do not doduct accured | alaima ar ayamatiana Dut |
| 1.2 | | | | | at is the property? Check all that apply Single-family home | /. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| | Street | address, if available, or o | other description | П | Duplex or multi-unit building | | | ims Secured by Property. |
| | | | | Ħ | Condominium or cooperative | | Current value of the entire property? | Current value of the portion you own? |
| | | | | | Manufactured or mobile home | | | |
| | Numb | er Street | | | Land | | Describe the nature o | f your ownership |
| | | | | H | Investment property Timeshare | | interest (such as fee s the entireties, or a life | |
| | City | State | Zip Code | H | Other | | | - Cotatoj, ii kilowiii |
| | | | | W/b | a had an interest in the average 2 Ch | ماد | | mmunity property |
| | | | | one | o has an interest in the property? Ch | eck | (see instructions) | |
| | | | | | Debtor 1 only | | _ | |
| | | | | | Debtor 2 only | | | |
| | | | | 口 | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | |
| | | | | Ц | | | m auch as les-l | |
| | | | | | er information you wish to add abou perty identification number: | . เมเราเย | iii, sucii as local | |

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| Debtor 1 | Dominique | Т | Jones | Case number | (if known) | |
|------------|--|----------------------|--|-----------------|---|---|
| | First Name | Middle Name | Last Name | _ | | |
| 1.3 | et address, if available, or o | | What is the property? Check all that ap Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | oply. | the amount of any secu | claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own? |
| City | State | Zip Code | Investment property Timeshare Other | - | Describe the nature of interest (such as fee sthe entireties, or a life | imple, tenancy by |
| | | | Who has an interest in the property? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anot | | Check if this is co (see instructions) | mmunity property |
| | | | Other information you wish to add ab | out this item, | such as local | |
| you ha | the dollar value of the pove attached for Part 1. W | rite that number h | all of your entries from Part 1, includ nere. ▶ | ing any entries | s for pages | |
| you own th | nat someone else drives. If ns, trucks, tractors, sport u | you lease a vehicle, | st in any vehicles, whether they are realso report it on Schedule G: Executory rcycles | - | • | |
| 3.1 | Model: Year: | | Who has an interest in the prope one. Debtor 1 only | erty? Check | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: nims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community prinstructions) | | Current value of the entire property? | Current value of the portion you own? |
| 3.2 | Make Model: Year: | | Who has an interest in the prope one. Debtor 1 only | rty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> nims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community pr | | Current value of the entire property? | Current value of the portion you own? |
| | | | instructions) | | | |

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| | Dominique First Name | T Middle Name | Jones Last Name | Case number | er (if known) | |
|------|---|-------------------|--|---|--|--|
| 3.3 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is communication. | ly s and another | the amount of any secu | claims or exemptions. Pured claims on Schedule in ired claims on Schedule in ims Secured by Property Current value of the portion you own? |
| 3.4 | Make Model: Year: Approximate mileage: Other information: | | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on | | the amount of any secu | claims or exemptions. Pured claims on Schedule in sche |
| | | | At least one of the debtore Check if this is commur instructions) | | | |
| Wat | ercraft aircraft motor ho | mee ATVs and othe | ar recreational vehicles other | vehicles and acce | esorias | |
| Exar | nples: Boats, trailers, motor No Yes | • | er recreational vehicles, other t, fishing vessels, snowmobiles, r | notorcycle accessori | es | rclaims or exemptions. Pu |
| Exar | nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the one. Debtor 1 only Debtor 2 only | notorcycle accessori | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule and schedule of the Current value of the |
| Exar | nples: Boats, trailers, motor No Yes Make Model: Year: | • | who has an interest in the one. Debtor 1 only | notorcycle accessori oroperty? Check ly s and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | claims or exemptions. Pured claims on <i>Schedule aims Secured by Property.</i> Current value of the portion you own? |
| 4.1 | nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage: | • | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor. Check if this is communication. | property? Check ly s and another lity property (see | Do not deduct secured the amount of any secu Creditors Who Have Clater Current value of the entire property? Do not deduct secured the amount of any secured. | red claims on Schedule hims Secured by Property Current value of the |

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Debtor 1 Dominique Jones Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... used furniture 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... (3)TV (1)Cellphone (1)Laptop \$600.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Used Jewelry, earrings, ring, watch 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$600.00 for Part 3. Write that number here

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Debtor 1 Dominique Jones Case number (if known) First Name Middle Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: Citibank Checking Account \$0.00 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Debt | tor 1 Dominique | T | Jones | Case number (if known) | |
|------|---------------------------|--|-----------------------------|---|---|
| | First Name | Middle Name | Last Name | | _ |
| 20. | Negotiable instruments | orate bonds and other negotial include personal checks, cashiers ents are those you cannot transfe | checks, promissory no | tes, and money orders. | |
| | | | | | |
| 21. | Retirement or pension | | thrift covings secounts | s, or other pension or profit-sharing plans | |
| | | na, Enisa, Reogii, 401(k), 403(b) |), tillit savings accounts | s, or other pension or profit-straining plans | |
| | ✓ No | Type of account: | Institution name: | | |
| | Yes. List each account | | mondation name. | | |
| | separately. | 401(k) or similar plan: | | | |
| | | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | | | | |
| | | Additional account: | | | |
| 22. | | prepayments d deposits you have made so that with landlords, prepaid rent, publi | | | |
| | Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract for | or a periodic payment of money to | you, either for life or for | r a number of years) | |
| | ✓ No | | | | |
| | Yes | Issuer name and description: | | | |
| | — | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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| Debto | or 1 Dominique First Name | | nes Case number | (if known) | |
|-------|--|--|--|---|---|
| 24. | | n account in a qualified AE | BLE program, or under a qualified sta | ite tuition program. | |
| | No Institution name and of Yes | description. Separately file the | records of any interests.11 U.S.C. § 52 | 21(c): | |
| | - | | | | |
| 25. | Trusts, equitable or future interest exercisable for your benefit | s in property (other than a | nything listed in line 1), and rights o | r powers | |
| | No Yes. Describe | | | | |
| 26. | Patents, copyrights, trademarks, t Examples: Internet domain names, w | | | | |
| | No Yes. Describe | | | | |
| 27. | Licenses, franchises, and other ge | | ation holdings, liquor licenses, profession | onal licenses | |
| | ✓ No Yes. Describe | | | | |
| | | | | | |
| Mon | ey or property owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or property owed to you? Tax refunds owed to you | | | | portion you own? |
| | | | | | portion you own? Do not deduct secured |
| | Tax refunds owed to you No Yes. Give specific information about them, including whet | Earned Income Credit, her Tax Refund | Child Tax Credit | -ederal: | portion you own? Do not deduct secured |
| | Tax refunds owed to you ☐ No ☐ Yes. Give specific information | | | | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owed to you No Yes. Give specific information about them, including whet you already filed the returns | | | State: | portion you own? Do not deduct secured claims or exemptions. \$649.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whet you already filed the returns and the tax years Family support Examples: Past due or lump sum alim | her Tax Refund | | State: .ocal: | portion you own? Do not deduct secured claims or exemptions. \$649.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whet you already filed the returns and the tax years Family support Examples: Past due or lump sum alim | her Tax Refund ony, spousal support, child s | Lupport, maintenance, divorce settlemer | State: Local: nt, property settlement | portion you own? Do not deduct secured claims or exemptions. \$649.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whet you already filed the returns and the tax years Family support Examples: Past due or lump sum alim | her Tax Refund ony, spousal support, child s | Lupport, maintenance, divorce settlemen | State: .ocal: nt, property settlement Nimony: | portion you own? Do not deduct secured claims or exemptions. \$649.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whet you already filed the returns and the tax years Family support Examples: Past due or lump sum alim | her Tax Refund ony, spousal support, child s | support, maintenance, divorce settlements | State: .ocal: nt, property settlement Nimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$649.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whet you already filed the returns and the tax years Family support Examples: Past due or lump sum alim | her Tax Refund ony, spousal support, child s | support, maintenance, divorce settlements | State: .ocal: nt, property settlement Nimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$649.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whet you already filed the returns and the tax years Family support Examples: Past due or lump sum alim | her Tax Refund ony, spousal support, child s | support, maintenance, divorce settlement pependents | State: Local: Int, property settlement Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$649.00 \$0.00 \$0.00 \$0.00 \$15000.00 |
| 29. | Tax refunds owed to you No Yes. Give specific information about them, including whet you already filed the returns and the tax years Family support Examples: Past due or lump sum alim No Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability in: | ony, spousal support, child s Child Support for All D | ependents penefits, sick pay, vacation pay, workers | State: Local: Int, property settlement Nimony: Maintenance: Support: Divorce settlement: Property settlement: | ### portion you own? Do not deduct secured claims or exemptions. #### \$649.00 #### \$0.00 #### \$0.00 #### \$0.00 #### \$0.00 ##### \$0.00 ################################# |
| 29. | Tax refunds owed to you No Yes. Give specific information about them, including whet you already filed the returns and the tax years Family support Examples: Past due or lump sum alim No Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability in: | ony, spousal support, child s Child Support for All D | ependents penefits, sick pay, vacation pay, workers | State: Local: Int, property settlement Nimony: Maintenance: Support: Divorce settlement: Property settlement: | ### portion you own? Do not deduct secured claims or exemptions. #### \$649.00 #### \$0.00 #### \$0.00 #### \$0.00 #### \$0.00 ##### \$0.00 ################################# |
| 29. | Tax refunds owed to you No Yes. Give specific information about them, including whet you already filed the returns and the tax years Family support Examples: Past due or lump sum alim No Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability in Social Security benefits; un | ony, spousal support, child s Child Support for All D | ependents penefits, sick pay, vacation pay, workers | State: Local: Int, property settlement Nimony: Maintenance: Support: Divorce settlement: Property settlement: | ### portion you own? Do not deduct secured claims or exemptions. #### \$649.00 #### \$0.00 #### \$0.00 #### \$0.00 #### \$0.00 ##### \$0.00 ################################# |

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| Deb | tor 1 | Dominique | T | Jones | Case number (if known) | |
|------|----------|--|---|---|--|--|
| | | First Name | Middle Name | Last Name | | |
| 31. | | erests in insurance amples: Health, disab | | th savings account (HSA); credit, h | nomeowner's, or renter's insurance | |
| | ✓ | No Yes. Name the insu of each policy and I | | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | If y | | | | y, or are currently entitled to receive | |
| 33. | | ims against third p | | ou have filed a lawsuit or made rance claims, or rights to sue | a demand for payment | |
| | ✓ | No Yes. Describe | | | | |
| 34. | | her contingent and set off claims | unliquidated claims of | every nature, including counter | claims of the debtor and rights | |
| | ✓ | No Yes. Describe | | | | |
| 35. | Any | y financial assets y | ou did not already list | | | |
| | ✓ | No Yes. Describe | | | | |
| 36. | | | - | n Part 4, including any entries fo | | \$15649.00 |
| Part | 5: | Describe Any B | usiness-Related Pro | oerty You Own or Have an I | nterest In. List any real estate in Part | 1. |
| 37. | Do | you own or have ar | ny legal or equitable int | erest in any business-related pr | operty? | |
| | ✓ | No. Go to Part 6. Yes. Go to line 38. | | | pc Do | urrent value of the ortion you own? o not deduct secured claims exemptions |
| 38. | _ | _ | or commissions you alre | ady earned | | |
| | | Yes. Describe | | | | |
| 39. | | | nishings, and supplies ated computers, software | modems, printers, copiers, fax ma | achines, rugs, telephones, desks, chairs, electr | onic devices |
| | ✓ | No Yes. Describe | | | | |
| | | | | | | |

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| Deb | tor 1 Dominique | Т | Jones | Case number (if known) | |
|----------|------------------------|-----------------------------------|-----------------------------------|---|--|
| 1.0 | First Name | Middle Name | Last Name | | |
| 40. | Machinery, fixtures, e | equipment, supplies you | use in business, and tools of y | our trade | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | _ | | | | |
| 44 | | | | | |
| 41. | Inventory | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 12 | Interests in partnersh | nine or joint vontures | | | |
| 42. | | iips or joint ventures | | | |
| | ✓ No | | Name of entity: | % of ownership: | |
| | Yes. Give specific | | Tham or only. | , o o o o o o o o o o o o o o o o o o o | |
| | information about them | | - | | |
| | arom | | | | |
| | | | | | |
| 12 | Customor lists mailing | g lists, or other compilat | ione | | |
| 43. | | j lists, or other compliat | iolis | | |
| | ✓ No | | | | |
| | Yes. Do your lists i | include personally identifial | ole information (as defined in 11 | U.S.C. § 101(41A))? | |
| | ☐ No | | | | |
| | Yes. Desc | erihe | | | |
| | | | | | |
| 44. | Any business-related | property you did not alr | eady list | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | |
| | information | | | | <u> </u> |
| | | | | | |
| | | | | | _ |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | art 5, including any entries fo | | |
| • | | | | | |
| Part | | | | y You Own or Have an Interest In. | |
| | If you own or have ar | n interest in farmland, list it i | n Part 1. | | |
| 46. | Do you own or have a | any legal or equitable int | erest in any farm- or commer | cial fishing-related property? | |
| | No. Go to Part 7. | | | | Current value of the |
| | Yes. Go to line 47 | | | | portion you own? Do not deduct secured claims |
| | | | | | or exemptions |
| 47. | Farm animals | | | | |
| | Examples: Livestock, p | oultry, farm-raised fish | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | _ | | | | |
| | | | | | |

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| Debt | or 1 Dominique | Madalla Nama | Jones | Case number (if known) | |
|--------------|--------------------------------|---|----------------------------|------------------------------|--------------|
| 40 | First Name | Middle Name | Last Name | | |
| 48. | Crops-either growing | or narvested | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 49. | Farm and fishing equi | oment, implements, machinery, fix | ctures, and tools of trade | | |
| | _ | , | , | | |
| | ✓ No Yes. Describe | | | | |
| | Tes. Describe | | | | |
| | | | | | |
| 50. | Farm and fishing supp | lies, chemicals, and feed | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| E 1 | Any form and somme | | did not also advillat | | |
| 51. | Any larm- and comme | rcial fishing-related property you | did not aiready list | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | Γ | |
| | | ll of your entries from Part 6, inclur here | | = | |
| • | | | | L | |
| | | | | | |
| | | | | | |
| Part | 7: Describe All Pro | perty You Own or Have an In | terest in That You Did | Not List Above | |
| 53. | | perty of any kind you did not alrea | dy list? | | |
| | Examples: Season ticket | s, country club membership | | | |
| | ✓ No | | | | |
| | Yes. Give specific information | | | | |
| | information | | | | |
| | | | | | |
| | | | | | |
| 54. A | dd the dollar value of a | Il of your entries from Part 7. Write | e that number here | | <u> </u> |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Part | List the Totals of | Each Part of this Form | | | |
| | | | | | |
| 55. F | Part 1: Total real estate | e, line 2 | | | |
| | | _ | | | |
| _ | part 2 total vehicles, lin | | | _ | |
| 57. P | art 3: Total personal ar | nd household items, line 15 | \$600.00 | <u> </u> | |
| 58. P | art 4: Total financial as | ssets, line 36 | \$15649.00 | | |
| 59. F | Part 5: Total business-r | elated property, line 45 | | _ | |
| 60 I | Part 6: Total farm, and | fishing-related property line 52 | | _ | |
| | | fishing-related property, line 52 | | <u></u> | |
| 61. F | Part 7: Total other prop | erty not listed, line 54 | | <u></u> | |
| 62. 1 | Total personal property | . Add lines 56 through 61 | \$16249.00 | | + \$16249.00 |
| | | | 4.32 10.00 | Copy personal property total | . \$.0210.00 |
| | | | | | \$16249.00 |
| 63. T | otal of all property on S | Schedule A/B. Add line 55 + line 62. | | | Ψ10249.00 |
| | | . , , | | ******** | 1 |

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| Fill in this infor | mation to identify your c | ase: | |
|---|---------------------------|-------------|----------------------|
| Debtor 1 | Dominique | Т | Jones |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | tt 1: Identify the Property You Clair | m as Exempt | | | | | | | |
|----|---|--|---|------------------------------------|--|--|--|--|--|
| 1. | Which set of exemptions are you claim | ing? Check one only, ev | ren if your spouse is filing with you. | | | | | | |
| | You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | | | |
| | You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | | |
| 2. | For any property you list on Schedule A | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | | | |
| | Brief description: Other financial account, Citibank Checking Account Line from Schedule A/B: 17 | \$0.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | | | |
| | Brief description: used furniture Line from Schedule A/B: 06 | \$0.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | | | |
| 3. | ✓ No | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case? | | | | | | |

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Debtor 1 Dominique Т Jones Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page Current value of** Brief description of the property and Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property own Check only one box for each exemption. Copy the value from Schedule A/B 735 ILCS 5/12-1001(e) Brief \$0.00 description: **✓** \$0 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) \$0.00 description: **✓** \$0 Used Jewelry, earrings, 100% of fair market value, up to any ring, watch applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(q)(1) Brief \$0.00 description: **V** \$0 Federal, Earned Income 100% of fair market value, up to any Credit, Child Tax Credit applicable statutory limit Line from Schedule A/B: 28 735 ILCS 5/12-1001(b) Brief \$649.00 description: $\overline{}$ \$649.00 Federal, Tax Refund 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$600.00 description: **✓** \$600.00 (3)TV (1)Cellphone 100% of fair market value, up to any (1)Laptop applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(g)(4) Brief \$15,000.00 description: **✓** \$15,000.00 Support, Child Support

100% of fair market value, up to any

applicable statutory limit

for All Dependents

29

Line from Schedule A/B:

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| | | | • | | | |
|------------------------|--------------------------------|----------------------------|---|--|------------------------------|------------------------------------|
| Fill in this infor | rmation to identify your c | ase: | | | | |
| Debtor 1 | Dominique | Т | Jones | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| | | | (State) | | | |
| Case number (If known) | _ | | | | | |
| Official | Form 106D | | | I | | Check if this is an amended filing |
| Schedu | ıle D: Credit | ors Who Ha | ve Claims Secure | ed by Prop | erty | 12/15 |
| more space is | | | le are filing together, both are equantle nber the entries, and attach it to t | | | |
| 1. Do any | creditors have claims s | secured by your proper | rty? | | | |
| ✓ No. | Check this box and subi | mit this form to the court | with your other schedules. You hav | e nothing else to repo | ort on this form. | |
| Yes. | Fill in all of the information | on below. | | | | |
| Part 1: List | All Secured Claims | | | | | |
| for each of | claim. If more than one cre | | rred claim, list the creditor separately list the other creditors in Part 2. As g to the creditor's name. | Column A Amount of claim Do not deduct the | Column B Value of collateral | Column C Unsecured |

value of collateral.

that supports

this claim

. If any Case 17-33827 Doc 1 Filed 11/11/17 Entered 11/11/17 13:51:39 Desc Main Document Page 23 of 75

| Fill in | n this inform | nation to identify your c | ase: | | | |
|---|--|--|--|---|---|---|
| Deb | tor 1 | Dominique | Т | Jones | | |
| | | First Name | Middle Name | Last Name | | |
| Deb | | | | | | |
| (Spot | use, if filing) | First Name | Middle Name | Last Name | | |
| Unit | ed States Ba | ankruptcy Court for the: | Northern | District of Illinois | | |
| 0 | | | | (State) | | |
| (If kno | e number own) | | | | | |
| Off | icial Fo | orm 106E/F | | | | Check if this is an amended filing |
| Sc | hedu | le E/F: Cre | ditors Who | Have Unsec | ured Claims | 12/15 |
| othei Form claim the e know | r party to an 106A/B) an 1s that are entries in th n). | ny executory contracts nd on Schedule G: Exe listed in Schedule D: C le boxes on the left. At | s or unexpired leases tha cutory Contracts and Un creditors Who Hold Claim | t could result in a claim. A expired Leases (Official Fo is Secured by Property. If i | also list executory contracts or form 106G). Do not include an nore space is needed, copy the | NONPRIORITY claims. List the on Schedule A/B: Property (Official y creditors with partially secured ne Part you need, fill it out, number ite your name and case number (if |
| Pari | | | | | | |
| | Do any cre | editors have priority un | secured claims against | you? | | |
| 1. | | D O | | | | |
| 1. | ✓ No. G | io to Part 2. | | | | |
| 1. | ✓ No. G Yes. | io to Part 2. | | | | |

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total

claim

Priority

amount

Nonpriority

amount

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| Debto | r 1 Dominique | T | Jones | Case number (if known) | |
|---------|---|---|---------------------|---|---------------------|
| Part 2 | First Name List All of Your NONF | Middle Name PRIORITY Unsecure | Last Name | | |
| | o any creditors have nonpr | iority unsecured claims | s against you? | e court with your other schedules. | |
| u It | nsecured claim, list the credite | or separately for each clai | m. For each claim I | er of the creditor who holds each claim. If a creditor has mo listed, identify what type of claim it is. Do not list claims already Part 3.If you have more than four priority unsecured claims fill | included in Part 1. |
| | ACCEPTANCE NOW | | | | Total claim |
| 4.1 | ACCEPTANCE NOW Nonpriority Creditor's Name 6288 Dawson Blvd | | | Last 4 digits of account number 0249 When was the debt incurred? 1/2015 | \$4,730.00 |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | City Who incurred the debt? Cl ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 of At least one of the debtor | only ors and another ates to a community de | Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other simila debts ✓ Other. Specify 036 UnknownLoanType | r |
| 4.2 | AmSher Collection Services | | | Last 4 digits of account number 9915 | \$213.00 |
| | Nonpriority Creditor's Name 600 BEACON PKWY W STE | 30 | | When was the debt incurred? 05/2015 | |
| | City Who incurred the debt? Cl Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtor Check if this claim rel Is the claim subject to offs Yes | only ors and another ates to a community de | Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other simila debts Other. Specify 001 Collection | |
| 4.3 | City of Chicago - Parking an Nonpriority Creditor's Name Department of Revenue - PC Number Street | - | | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent | \$2,000.00 |
| | Who incurred the debt? Cl Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 of At least one of the debtor | only ors and another ates to a community de | Code | Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other simila debts ✓ Other. Specify DL#: J520-1778-7699 | r |

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Т Debtor 1 Dominique Jones Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 City of Chicago Dept of Finance Citation Admin \$536.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 5289 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60680 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 701-00009128336 Other. Specify ____ Is the claim subject to offset? **✓** No T Yes ComEd \$1,445.60 9046 Last 4 digits of account number ___ Nonpriority Creditor's Name When was the debt incurred? 1919 Swift Drive n/a Number As of the date you file, the claim is: Check all that apply. Contingent 60523 Illinois Oak Brook Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes CONVERGENT OUTSOURCING 4.6 \$261.00 Last 4 digits of account number 2440 Nonpriority Creditor's Name 10750 HAMMERLY BLVD #200 When was the debt incurred? 11/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent 77043 Texas Houston Unliquidated City Zip Code State Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

debts
Other. Specify

001 Collection

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Jones Last Name Case number (if known) Debtor 1 Dominique First Name Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page

| | After listing any entries on this page, number them beginning with | th 4.5, followed by 4.6, and so forth. | Total claim |
|-----|--|---|-------------|
| 4.7 | DIVERSIFIED | Last 4 digits of account number 7643 | \$706.00 |
| | Nonpriority Creditor's Name POB 551268 | When was the debt incurred? 3/2017 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. Contingent | |
| | JACKSONVILLE Florida 32255 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts Collecting for ORIGINAL Other. Specify CREDITOR: 11 COMCAST | |
| | Is the claim subject to offset? No | Other opening | |
| | Yes | | |
| 4.8 | DIVERSIFIED CONSULTANT Nonpriority Creditor's Name | Last 4 digits of account number 4317 | \$972.00 |
| | 10550 DEERWOOD PARK BLVD | When was the debt incurred? 8/2017 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. Contingent | |
| | | | |
| | JACKSONVILLE Florida 32256 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 only | Student loans | |
| | Debtor 2 only | Obligations arising out of a separation agreement or | |
| | Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | Collecting for ORIGINAL | |
| | Is the claim subject to offset? | Other. Specify CREDITOR: ATT DIRECTV | |
| | ✓ No Yes | | |
| 4.9 | FED LOAN SERV | Last 4 digits of account number 0002 | \$9,205.00 |
| | Nonpriority Creditor's Name POB 60610 | When was the debt incurred? 8/2010 | |
| | Number Street | As of the date you file the claim is: Check all that apply | |
| | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | Harrisburg Pennsylvania 17106 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | ✓ No | | |
| | T Yes | | |

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Т Debtor 1 Dominique Jones Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** FED LOAN SERV 4.10 \$4,402.00 Last 4 digits of account number Nonpriority Creditor's Name POB 60610 When was the debt incurred? 7/2011 Street Number As of the date you file, the claim is: Check all that apply. Contingent Harrisburg Pennsylvania 17106 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.11 FED LOAN SERV \$4,150.00 Last 4 digits of account number 0001 Nonpriority Creditor's Name POB 60610 When was the debt incurred? 8/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent Pennsylvania 17106 Harrisburg Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes FED LOAN SERV 4.12 \$1,994.00 Last 4 digits of account number Nonpriority Creditor's Name POB 60610 When was the debt incurred? 7/2011 Street Number As of the date you file, the claim is: Check all that apply. Contingent 17106 Harrisburg Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

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Т Debtor 1 Dominique Jones Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** FEDERAL LOAN. SERVICING 4.13 \$7,976.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 60610 When was the debt incurred? 08/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent Harrisburg Pennsylvania 17106 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ 153 Educational Is the claim subject to offset? **✓** No Yes 4.14 FEDERAL LOAN. SERVICING \$3,814.00 Last 4 digits of account number 0004 Nonpriority Creditor's Name PO Box 60610 When was the debt incurred? 07/2011 Number Street As of the date you file, the claim is: Check all that apply. Contingent Pennsylvania 17106 Harrisburg Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt ✓ Other. Specify ____ 153 Educational Is the claim subject to offset? **✓** No Yes FEDERAL LOAN. SERVICING 4.15 \$3,796.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 60610 When was the debt incurred? 08/2010 Number As of the date you file, the claim is: Check all that apply. Contingent 17106 Harrisburg Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ 153 Educational Is the claim subject to offset? No

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Т Debtor 1 Dominique Jones Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** FEDERAL LOAN. SERVICING 4.16 \$1,861.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 60610 When was the debt incurred? 07/2011 Number Street As of the date you file, the claim is: Check all that apply. Contingent Harrisburg <u>Penn</u>sylvania 17106 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ 153 Educational Is the claim subject to offset? **✓** No Yes 4.17 FIRST PREMIER BANK \$434.00 Last 4 digits of account number Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. c/o Kelly Lukason Contingent Saint Cloud Minnesota 56302 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? **✓** No Yes LVNV FUNDING LLC 4.18 \$195.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 52815 When was the debt incurred? 10/2015 Number As of the date you file, the claim is: Check all that apply. c/o Jeremy T. McCullough Aldridge Pite Haan, LLP Contingent 30355 Atlanta Georgia Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify 001 UnknownLoanType Is the claim subject to offset? No

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Debtor 1 Dominique Jones Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 OKINUS, INC \$876.00 Last 4 digits of account number Nonpriority Creditor's Name 157 WEST RAILRD ST When was the debt incurred? 02/2015 Number As of the date you file, the claim is: Check all that apply. Contingent PELHAM Georgia 31779 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt ✓ Other. Specify _ InstallmentLoan Is the claim subject to offset? Yes 4.20 Peoples Gas \$1,500.00 Last 4 digits of account number Nonpriority Creditor's Name 200 E. Randolph When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60601 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify gas bill Is the claim subject to offset? **✓** No Yes PLS Loan Store 4.21 \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 154 N Wabash Ave Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60601 Chicago Illinois Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No

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Т Debtor 1 Dominique Jones Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 Rent a Center (Corporate) \$4,730.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 01/2015 5501 Headquarters Drive Number As of the date you file, the claim is: Check all that apply. Contingent Plano Texas 75024 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ 036 UnknownLoanType Is the claim subject to offset? Yes 4.23 ROBERT MORRIS COLLEG \$2,938.00 Last 4 digits of account number R24A Nonpriority Creditor's Name 401 S. STATE ST. When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated CHICAGO 60605 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ School Tuition Is the claim subject to offset? **✓** No Yes ROBERT MORRIS UNI-IL 4.24 \$4,442.00 4AL7 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 9/2010 401 S State Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60605 Chicago Illinois Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ____ Tuition Is the claim subject to offset? **✓** No

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Т Debtor 1 Dominique Jones Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.25 STELLAR RECOVERY INCORPORATED \$548.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 12/2014 4500 Salisbury Rd Ste 10 Number As of the date you file, the claim is: Check all that apply. Contingent Jacksonville Florida 32216 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ 001 Collection Is the claim subject to offset? **✓** No Yes 4.26 TURNER ACCEP \$5,654.00 Last 4 digits of account number 4302 Nonpriority Creditor's Name 4450 N WESTERN When was the debt incurred? 02/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **CHICAGO** Illinois 60625 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Repo & Surrender to Vehicle Is the claim subject to offset? **✓** No Yes **VALUE AUTO** 4.27 \$17,360.00 Last 4 digits of account number 9001 Nonpriority Creditor's Name 2734 N CICERO When was the debt incurred? 12/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **CHICAGO** 60639 Illinois Zip Code Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Repo & Surrender to Vehicle Is the claim subject to offset?

✓ No Yes

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| Debtor 1 Dominique | I | Jones | Case number (if known) | |
|--|---|-----------------------------------|---|-------------------|
| First Name | Middle Name | Last Name | | |
| Part 2: Your NONPRIORIT | Y Unsecured Claims - | Continuation Page | | |
| After listing any entries | on this page, number the | em beginning with 4.5, fo | ollowed by 4.6, and so forth. | Total claim |
| 4.28 WEBBNK/FSTR Nonpriority Creditor's Nan 6250 RIDGEWOOD ROA Number Street | | When As of t | digits of account number 2016 was the debt incurred? 04/2015 he date you file, the claim is: Check all that ap | \$195.00 oply. |
| SAINT CLOUD City Who incurred the debt? Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the de Check if this claim is the claim subject to c | State Zip Check one. 2 only btors and another relates to a community d | Code Ur Type o Str div Delebt | ontingent Iliquidated Sputed If NONPRIORITY unsecured claim: udent loans Digations arising out of a separation agreement of vorce that you did not report as priority claims obts to pension or profit-sharing plans, and other obts her. Specify 6 InstallmentLoan | |
| Yes | | | | |

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Debtor 1 Dominique T Jones Case number (if known)
First Name Middle Name Last Name

| collection agent | cy is trying to collect cy here. Similarly, if y | from you for a deb ou have more that | out your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if bt you owe to someone else, list the original creditor in Parts 1 or 2, then list the on one creditor for any of the debts that you listed in Parts 1 or 2, list the additional on be notified for any debts in Parts 1 or 2, do not fill out or submit this page. |
|------------------|---|---|--|
| JVDB ASC | | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| PO Box 5718 | | | Line 4.26 of (Check Part 1: Creditors with Priority Unsecured Cla |
| Number Stree | et | | one): Part 2: Creditors with Nonpriority Unsecured Claims |
| Elgin | Illinois | 60121 | Last 4 digits of account number 4302 |
| City | State | Zip Code | Last 4 digits of account number |
| JVDB | | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| 330 S. Wells # 1 | 300 | | Line 4.26 of (Check Part 1: Creditors with Priority Unsecured Cla |
| Number Stree | | | one): Part 2: Creditors with Nonpriority Unsecured Claims |
| Chicago | Illinois | 60606 | |
| City | State | Zip Code | Last 4 digits of account number 4302 |
| HARRIS & HARR | IS LTD | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| 111 W JACKSON | N BLVD S-400 | | Line 4.3 of (Check Part 1: Creditors with Priority Unsecured Cla |
| Number Stree | | | one): Part 2: Creditors with Nonpriority Unsecured Claims |
| CHICAGO | Illinois | 60604 | Last 4 digits of account number |
| City | State | Zip Code | Last 4 digits of account number |
| direct tv | | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| P.O. Box 78616 | | | Line 4.8 of (Check Part 1: Creditors with Priority Unsecured Cla |
| Number Stree | | | one): |
| | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Phoenix | Arizona | 85062 | |
| City | State | Zip Code | Last 4 digits of account number 4317 |
| Comcast | | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| p.o. box 196 | | | Line 4.7 of (Check Part 1: Creditors with Priority Unsecured Cla |
| Number Stree | et | | onel: |
| | | | ✓ Part 2: Creditors with Nonpriority Unsecured Claims |
| Newark | New Jersey | 07101 | |
| City | Ctoto | Zin Codo | Last 4 digits of account number 7643 |

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Debtor 1 Dominique T Jones Case number (if known)

| First Nan | ne Middle Name Last Name | | | | | | |
|--------------------------|--|--------|-----------------------------|----------|----------------|-----|--|
| Part 4: Add th | e Amounts for Each Type of Unsecured Claim | | | | | | |
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | for st | tatistical reporting purpos | es only. | . 28 U.S.C. §1 | 59. | |
| | | | Total claims | | | | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | | | | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | | | | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | | | | |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 | | | | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 | | | | |
| | | | Total claims | | | | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$19,751.00 | | | | |
| nom r art z | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | | | | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | | | | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$67,682.60 | | | | |
| | Gi Total Add lines Of through Gi | e: | \$87,433.60 | | | | |

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| Fill in this information to identify your case: | | | | | |
|---|------------|-------------|------------------------------|--|--|
| Debtor 1 | Dominique | Т | Jones | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | | |
| Case number | | | | | |

Official Form 106G

| | Check if this is an |
|---|---------------------|
| _ | amended filing |

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| ı | Person or com | pany with whom you have | the contract or lease | State what the contract or lease is for |
|-----|------------------------|-------------------------|-----------------------|---|
| 2.1 | Bronzville Realty Name | | | Other, Other, landlord |
| | 4823 S Langley Ave | | | |
| | Number | Street | | |
| | Chicago | Illinois | 60615 | |
| | City | State | Zip Code | |

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| Fill in this infor | mation to identify you | r case: | | |
|---------------------------------|-------------------------|---------------------------------|--------------------------------|--|
| Debtor 1 | Dominique | Т | Jones | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for th | e: Northern | District of Illinois | |
| | | <u> </u> | (State) | |
| Case number (If known) | | | | |
| | | | | Check if this is an |
| Official | Form 106L | ı | | amended filing |
| Official | Form 106F | <u>1</u> | | |
| Schedul | e H: Your Co | odebtors | | 12/15 |
| No Yes Within the | e last 8 years, have y | | operty state or territory? ((| odebtor.) Community property states and territories include Arizona, California, |
| | Go to line 3. | Mexico, Puerto Rico, Texas, W | rashington, and wisconsin.) | |
| | | mer spouse, or legal equiva | alent live with you at the tim | e? |
| | No | | • | |
| | Yes. In which commu | unity state or territory did yo | u live? | Fill in the name and current address of that person. |
| | Name of value | - fa | | <u> </u> |
| | Name of your spous | e, former spouse, or legal equ | nvaient | |
| | Number Street | | | <u> </u> |
| | City | State | Zip Code | <u> </u> |
| 0 1- 0-1 | ad Bakalladını ili | dahtan Damatinah d | | and the state of t |
| again as | a codebtor only if tha | t person is a guarantor or o | osigner. Make sure you ha | our spouse is filing with you. List the person shown in line 2 ve listed the creditor on Schedule D (Official Form 106D), ule D, Schedule E/F, or Schedule G to fill out Column 2. |

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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| | | Do | cument F | age 38 | OT /5 | | | |
|---------------------------------|--|--|----------------------|-------------------|-------------------|--------------------------------|-------------------|------------------------------|
| Fill in this inf | ormation to identify | your case: | | | | | | |
| Debtor 1 | Dominique | Т | Jones | | | | | |
| | First Name | Middle Name | Last Name |) | - Che | ck if this is: | | |
| Debtor 2 (Spouse, if filing) | First Name | Mistalla Nassa | Last Name | | - - | An amended fili | na | |
| (Spouse, ii iiiiig) | First Name | Middle Name | Last Name |) | | | | actition chapter 13 |
| United States the: | Bankruptcy Court for | Northern | District of Illinois | | | expenses as of | | oetition chapter 13 date: |
| Case number | | | (State |) | | | | |
| (If known) | | | | | | MM / DD / YYY | Υ | |
| Official | Form 106I | | | | | | | |
| Schedu | le I: Your In | come | | | | | | 12/15 |
| number (if kr | own). Answer ever | • | | | · | | • | |
| _ | r employment | | Debtor 1 | | | Debtor 2 | | |
| attach a se | e more than one job, parate page with n about additional | Employment status Occupation | Employed Not Emplo | yed | | Employed Not Emplo | | |
| Include pa | rt time, seasonal, or | Employer's name | Mercy Hospital | & Medical C | enter | Community R | lenewal Societ | у |
| Occupatio | n may include student | Employer's address | 2525 S. Michig | gan Avenue | | 111 W Jackson Number Street | on Blvd #820 | |
| or nomem | aker, if it applies. | | | | | _ | | |
| | | | Chicago City | Illinois State | 60616 Zip Code | Chicago City | Illinois State | 60604 Zip Code |
| | | How long employed there? | 5 months | | | 5 months | | |
| | ve Details About N | | | | | do: | | - CII |
| spouse unles | s you are separated. | the date you file this form | - | | - | | | |
| | non-filing spouse have attach a separate she | e more than one employer, et to this form. | combine the info | mation for a | all employers fo | r tnat person or | ı tne lines bel | ow. If you need |
| | · | | | For D | ebtor 1 | For Debtor 2 non-filing spo | | |
| | | ary, and commissions (befo , calculate what the monthly | | | \$2,105.48 | | 3,750.00 | |

+ \$0.00

\$2,105.48

+ \$0.00 \$3,750.00

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

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| Debto | r 1Dominique First Name | I Middle Name | Jones Last Name | | Case number known) | | | |
|-----------------------|---|---|--------------------|--------------|-----------------------|-----------------------------------|-------|-------------------------|
| | | made rame | <u> </u> | | For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| Сор | y line 4 here | | → 4. | | \$2,105.48 | \$3,750.00 | | |
| 5. List | all payroll ded | | | | | | | |
| 5a. | Tax, Medicare, | , and Social Security deductions | 5a | ì | \$326.32 | \$922.60 | | |
| 5b. | Mandatory cor | ntributions for retirement plans | 5b |). <u> </u> | \$0.00 | \$0.00 | | |
| 5c. | Voluntary cont | ributions for retirement plans | 50 |) | \$42.12 | \$0.00 | | |
| 5d. | Required repa | yments of retirement fund loans | 50 | d | \$0.00 | \$0.00 | | |
| 5e. | Insurance | | 5€ | e | \$0.00 | \$0.00 | | |
| 5f. | Domestic supp | ort obligations | 5f | _ | \$0.00 | \$0.00 | | |
| 5g. | Union dues | | 59 | J | \$0.00 | \$0.00 | | |
| 5h. | Other deduction | ons. Specify: | 5h | 1. + _ | \$0.00 + | \$0.00 | | |
| 6. Add +5h. | the payroll de | ductions. Add lines 5a + 5b + 5c + 5d + 5e + | +5f + 5g 6. | _ | \$368.44 | \$922.60 | | |
| 7. Cald | culate total mo | nthly take-home pay. Subtract line 6 from li | ine 4. 7. | - | \$1,737.04 | \$2,827.40 | | |
| 8. List | all other incon | ne regularly received: | | | | | | |
| | business, profe | • | | | | | | |
| | | ent for each property and business showing ordinary and necessary business expenses, a | nd | | | | | |
| | the total monthl | ly net income. | 8a | ì | \$0.00 | \$0.00 | | |
| 8b. | Interest and di | ividends | 8b |) | \$0.00 | \$0.00 | | |
| | dependent reg | · | | | | | | |
| | | r, spousal support, child support, maintenanc ent, and property settlement. | ce, 8d |). | \$0.00 | \$0.00 | | |
| 8d. | Unemploymen | t compensation | 80 | d | \$0.00 | \$0.00 | | |
| 8e. | Social Security | y | 86 | Э. | \$0.00 | \$0.00 | | |
| | Include cash ass cash assistance under the Suppl housing subsidi Specify: | | fits | | \$622.00 | \$0.00 | | |
| | | e Programs Income irement income | 8f 8g | _ | \$632.00 \$0.00 | \$0.00 | | |
| | | income. Specify: | _ |). + 1. + | \$0.00 + | \$0.00 | | |
| | _ | ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g | | _ | \$632.00 | \$0.00 | | |
| 0.7144 | an other moor | | g 1 om o. | <u> -</u> | Ψ002.00 | Ψ0.00 | | |
| | | r income. Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing | spouse 10 |). | \$2,369.04 + | \$2,827.40 | = | \$5,196.44 |
| Incl frier | lude contribution nds or relatives. | gular contributions to the expenses that y ns from an unmarried partner, members of yo amounts already included in lines 2-10 or am | ur household, | your de | ependents, your roomm | | | |
| Spe | ecify: | | | | | | 11. + | \$0.00 |
| | | n the last column of line 10 to the amoun | | | | | 12. | \$5,196.44 |
| | | ŕ | • | | амнисэ анч Пенацей Da | ια, τι τι αμμιτό | | Combined monthly income |
| 13. 00 | No. | increase or decrease within the year afte | a you me this | ioiiii? | | | | |
| | Yes. Explain: | | | | | | | |
| | | | | | | | | |

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| | | Doct | iment Page 40 of 75 |) | |
|----------------------------|--------------------|--|---|-------------------|---|
| Fill in this infor | mation to identify | your case: | | | |
| Debtor 1 | Dominique | Т | Jones | | |
| | First Name | Middle Name | Last Name | Check if this is: | |
| Debtor 2 | = | | | An amended fili | na |
| (Spouse, if filing) | First Name | Middle Name | Last Name | 브 | _ |
| | Bankruptcy Court | for the: Northern | District of Illinois (State) | | howing post-petition chapter 13 the following date: |
| Case number (If known) | | | _ | MM / DD / YYY | Y |
| Official | Form 10 | <u>6J</u> | | | |
| Schedul | e J: Your | Expenses | | | 12/15 |
| information. If | | as possible. If two married people a eeded, attach another sheet to this on. | | | |
| Part 1: Des | cribe Your Ho | usehold | | | |
| 1. Is this a joi | nt case? | | | | |
| ✓ No. Go | o to line 2 | | | | |
| Yes. D | oes Debtor 2 live | in a separate household? | | | |
| | No | | | | |
| [| Yes. Debtor 2 | must file Official Forms 106J-2, Exper | nses for Separate Household of Debi | tor 2. | |
| 2. Do you hav | e dependents? | No | | | |
| Do not list I Debtor 2. | Debtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| | | · | Child | 10 years | No. |
| | | | Child | 8 years | Yes. No. |
| | | | | | Yes. |
| | | | Child | 3 years | No. ✓ Yes. |
| | - | ✓ No ☐ Yes | | | |
| Part 2: Esti | mate Your Ong | going Monthly Expenses | | | |
| | of a date after th | your bankruptcy filing date unless e bankruptcy is filed. If this is a sup | | | |
| | • | h non-cash government assistance luded it on Schedule I: Your Income | • | | Your expenses |
| 4. The renta | | ship expenses for your residence. In | • | | \$1,375.00 |
| | luded in line 4: | | | | 4. |
| | state taxes | | | | 4a \$0.00 |

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Dominique First Name
 T
 Jones Last Name
 Case number (if known)

| riist Name | Middle Name Last Name | | |
|--|--|-----|---------------|
| | | | Your expenses |
| 5. Additional mortgage payment | s for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | | |
| 6a. Electricity, heat, natural gas | | 6a. | \$295.00 |
| 6b. Water, sewer, garbage colle | ction | 6b. | \$0.00 |
| 6c. Telephone, cell phone, Inter | net, satellite, and cable services | 6c. | \$330.00 |
| 6d. Other. Specify: | | 6d | \$0.00 |
| 7. Food and housekeeping suppl | | 7. | \$980.00 |
| 8. Childcare and children's educ | ation costs | 8. | \$455.00 |
| 9. Clothing, laundry, and dry cle | aning | 9. | \$293.00 |
| 10. Personal care products and | services | 10. | \$190.00 |
| 11. Medical and dental expense | S | 11. | \$125.00 |
| 12. Transportation. Include gas, in Do not include car payments | maintenance, bus or train fare. | 12. | \$300.00 |
| 13. Entertainment, clubs, recrea | tion, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions and | religious donations | 14. | \$0.00 |
| 15. Insurance. Do not include insurance deduc | sted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | | 15a | \$0.00 |
| 15b. Health insurance | | 15b | \$0.00 |
| 15c. Vehicle insurance | | 15c | \$0.00 |
| 15d. Other insurance. Specify: | | 15d | \$0.00 |
| 16. Taxes. Do not include taxes de | ducted from your pay or included in lines 4 or 20. | | |
| Specify: | | 16 | \$0.00 |
| 17. Installment or lease paymen | ts: | | |
| 17a. Car payments for Vehicle 1 | | 17a | \$0.00 |
| 17b. Car payments for Vehicle 2 | | 17b | \$0.00 |
| 17c. Other. Specify: | | 17c | \$0.00 |
| 17-l Other Constitu | | 17d | \$0.00 |
| | naintenance, and support that you did not report as deducted from | | \$0.00 |
| | I, Your Income (Official Form 106I). | 18. | |
| Specify: | support others who do not live with you. | 19. | \$0.00 |
| | not included in lines 4 or 5 of this form or on Schedule I: Your Income. | 13. | Ψ0.00 |
| 20a. Mortgages on other prope | | 20a | \$0.00 |
| 20b. Real estate taxes. | | 20b | \$0.00 |
| 20c. Property, homeowner's, o | renter's insurance | 20c | \$0.00 |
| 20d. Maintenance, repair, and ι | pkeep expenses. | 20d | \$0.00 |
| 20e. Homeowner's association | or condominium dues | 20e | \$0.00 |
| | | | |

Official Form 106J Schedule J: Your Expenses page 2

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| Debtor 1 Do | ominique | Т | Jones | Case number (if known) | | |
|----------------------|------------|--|--|------------------------|-----|----------------|
| Fir | rst Name | Middle Name | Last Name | <u> </u> | | |
| 21. Other. S | Specify: | Husbands Vehicle Monthly Payment, F | Husbands Vehicle Insurance, Husband | ds Credit Card | 21 | \$890.00 |
| 22. Calcula | ate your | monthly expenses. | | | | \$5,233.00 |
| 22a. Add | d lines 4 | through 21. | | | | \$0.00 |
| 22b. Co | py line 2 | 2 (monthly expenses for Debtor 2), if a | ny, from Official Form 106J-2 | | | \$5,233.00 |
| 22c. Add | d line 22 | a and 22b. The result is your monthly e | expenses. | | 22. | |
| 23.Calcula | te your | monthly net income. | | | | |
| 23a. Co _l | py line 1 | 2 (your combined monthly income) fro | m Schedule I. | | 23a | \$5,196.44 |
| 23b. Co | py your | monthly expenses from line 22 above. | | | 23b | \$5,233.00 |
| | , | ur monthly expenses from your month | ly income. | | | (\$36.56) |
| Th | e result i | s your monthly net income. | | | 23c | |
| For exa | ample, do | an increase or decrease in your expoyou expect to finish paying for your cent to increase or decrease because of | ar loan within the year or do you expe | ect your | | |

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| Fill in this infor | mation to identify your c | ase: | |
|---------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Dominique | Т | Jones |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois |
| Case number | | | (State) |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | | |
|-----|--|---|--|
| | Did you pay or agree to pay someone who is NOT an attorney to h | nelp you fill out bankruptcy forms? | |
| | ✓ No | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |
| | | | |
| | | | |
| | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and | |
| x | • | × | |
| ~ | /s/ Dominique Jones Signature of Debtor 1 | Signature of Debtor 2 | |
| | Signature of Debtor 1 | Signature of Debtor 2 | |
| | Date 11/11/2017 | Date | |
| | MM/DD/YYYY | MM/DD/YYYY | |

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| Fill in this info | ormation to identify your | case: | | | | | |
|---------------------------------|--|---------------------------------|---|--|-------|----------|--|
| Debtor 1 | Dominique First Name | T Middle N | Jones Name Last Nam | | | | |
| Debtor 2 | First Name | Middle i | name Last nam | e | | | |
| (Spouse, if filing) | First Name | Middle N | Name Last Nam | e | | | |
| United States | Bankruptcy Court for the | : Northern | District of Illino | | | | |
| Case numbe (If known) | | | (Stat | e) | | | |
| Official | Form 107 | | | | | | Check if this is amended filing |
| | | al Affairs f | or Individuals | Filing for Ba | ankru | ptcy | 04 |
| nformation number (if k | If more space is need nown). Answer every o | led, attach a sepa question. | arried people are filing arate sheet to this form and Where You Lived | . On the top of any | | | |
| | s your current marital s | | and where rou lived | Belore | | | |
| | o , o a . o a o | | | | | | |
| | arriad | | | | | | |
| · · | arried ot married | | | | | | |
| <u> </u> | arried ot married | | | | | | |
| N | ot married | ou lived anywhere | e other than where you liv | ve now? | | | |
| 2. During | ot married the last 3 years, have y | • | · | | | | |
| 2. During | ot married the last 3 years, have y | • | e other than where you liv t 3 years. Do not include v | | | | |
| 2. During | ot married the last 3 years, have y | • | · | | | | Dates Debtor 2 lived there |
| 2. During | ot married the last 3 years, have y o es. List all of the places y | • | t 3 years. Do not include v | vhere you live now. | tor 1 | | |
| 2. During N | ot married the last 3 years, have y o es. List all of the places y ebtor 1: | • | t 3 years. Do not include v | where you live now. Debtor 2: | tor 1 | | there |
| 2. During N Y D | ot married the last 3 years, have y o es. List all of the places y | • | t 3 years. Do not include v | where you live now. Debtor 2: | tor 1 | | there |
| 2. During N Y D | ot married the last 3 years, have your ses. List all of the places your sebtor 1: | • | Dates Debtor 1 lived there | Debtor 2: Same as Debt | tor 1 | | Same as Debtor 1 |
| 2. During N Y D | ot married the last 3 years, have your search and the places your search and the places you sea | ou lived in the last | Dates Debtor 1 lived there | Debtor 2: Same as Debt Number Street | | Tin Code | Same as Debtor 1 From |
| 2. During N Y O 7/1 N 7/1 N C | ot married the last 3 years, have your search and the places your search and the places you search are the places you search and the places you search are the places you search and the places you search are the places you search and the places you search are the places you search and the places you search are the places you search are the places you search and the places you search are the places you search and the places you search are the places you sea | ou lived in the last | Dates Debtor 1 lived there | Debtor 2: Same as Debt Number Street City | State | Zip Code | Same as Debtor 1 From To |
| 2. During N Y O 7/1 N 7/1 N C | ot married the last 3 years, have your search and the places your search and the places you sea | ou lived in the last | Dates Debtor 1 lived there | Debtor 2: Same as Debt Number Street | State | Zip Code | Same as Debtor 1 From |
| 2. During N Y D | the last 3 years, have your ses. List all of the places you be better 1: 559 S Bennett Ave umber Street nicago Illinois ty State | ou lived in the last | Dates Debtor 1 lived there | Debtor 2: Same as Debt Number Street City Same as Debt | State | Zip Code | Same as Debtor 1 From To |
| 2. During N Y D | ot married the last 3 years, have your search and the places your search and the places you sea | ou lived in the last | Dates Debtor 1 lived there From To 2015 | Debtor 2: Same as Debt Number Street City | State | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 |
| 2. During N Y D | the last 3 years, have you see. List all of the places years. List all of the places years. So S Bennett Ave sumber Street Illinois ty State | ou lived in the last | Dates Debtor 1 lived there From To2015 | Debtor 2: Same as Debt Number Street City Same as Debt | State | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 From |

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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Debtor 1 Dominique Jones Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$8942.35 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$18681.00 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$18000.00 For the calendar year before that: commissions, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and exclusions) and exclusions) \$632 monthly from link \$6,320.00 From January 1 of current year until the date you filed for bankruptcy: unemployment benefits \$2,691.00 For last calendar year: \$632 monthly from link \$7,584.00 (January 1 to December 31, 2016 \$632 monthly from link \$7,584.00 For the calendar year before that: (January 1 to December 31, 2015

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Jones Debtor 1 Dominique __ Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or

vendors
Other

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| Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? nsiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing gent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Dates of payment paid Amount you still owe Reason for this payment Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an nsider? | or 1 | Dominique | | Т | Jo | nes | Case number | (if known) |
|--|-------------------|--|-------------------------------------|--|--|---|--|--|
| insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? No Yes. List all payments that benefited an insider. City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider. Dates of payments on debts guaranteed or cosigned by an insider. Dates of payments on debts guaranteed or signed by an insider. Total amount paid Amount you still owe Reason for this payment still owe Reason for this payment still owe Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? No Yes. List all payments that benefited an insider. Dates of payment Total amount paid No State Zip Code Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code | | First Name | | Middle Name | Las | st Name | | |
| Ves. List all payments to an insider. Dates of payment Total amount you still owe | nsi orp ige | ders include your porations of which nt, including one | relatives; an you are a for a busin | any general partner an officer, director, ness you operate a | s; relatives of any person in control | general partners; par , or owner of 20% or | tnerships of which y more of their voting | ou are a general partner; g securities; and any managing |
| Insider's Name Number Street City State Zip Code Vithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Number Street City State Zip Code Vithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Number Street Number Street Number Street Number Street Number Street Number Street City State Zip Code Insider's Name Number Street City State Zip Code | ✓ | | | | | | | |
| Number Street City State Zip Code | _ | Yes. List all pay | ments to a | an Insider. | | | | Reason for this payment |
| City State Zip Code Insider's Name Number Street | | Insider's Name | | | | | | |
| Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Insider's Name Number Street City State Zip Code Insider's Name Insider's Name Insider's Name Insider's Name Insider's Name | | Number Street | | | | | | |
| Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? nclude payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Total amount you still owe Insider's Name Number Street City State Zip Code Insider's Name | | City | State | Zip Code | | | | |
| City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Insider's Name Number Street City State Zip Code Insider's Name | | Insider's Name | | | | | | |
| Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Dates of payment Insider's Name Number Street City State Zip Code Insider's Name | | Number Street | | | | | | |
| Yes. List all payments that benefited an insider. Dates of payment Paid Total amount paid Still owe Reason for this payment Include creditor's name Insider's Name City State Zip Code Insider's Name | | City | State | Zip Code | | | | |
| Number Street City State Zip Code Insider's Name | insi | der? ude payments on No | debts gua | aranteed or cosigne | ed by an insider. sider. Dates of | Total amount | Amount you | Reason for this payment |
| City State Zip Code Insider's Name | | Insider's Name | | | | | | |
| Insider's Name | | Number Street | | | | | | |
| | _ | City | State | Zip Code | | | | |
| Number Street | | Insider's Name | | | | <u> </u> | | |
| | | Number Street | | | | | | |
| City State Zip Code | | City | State | Zip Code | | | | |

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Debtor 1 Dominique Jones Case number (if known) Middle Name First Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Finance started garnishing every paycheck 11/2017 \$0 TURNER ACCEP Creditor's Name Explain what happened 4450 N WESTERN Number Street Property was repossessed. Property was foreclosed. **CHICAGO** Illinois 60625 Property was garnished. State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished.

City

State

Zip Code

Property was attached, seized, or levied.

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| Debt | tor 1 Dominique First Name | T Middle Name | Jones Last Name | Case number (if known) | |
|------|-------------------------------|---|-----------------------------|---|------------------------|
| 11. | | e you filed for bankruptcy, did o make a payment because yo | | pank or financial institution, set off any am | ounts from your |
| | ✓ No Yes. Fill in the de | tails. | | | |
| | | | Describe the action th | e creditor took Date action was taken | Amount |
| | Creditor's Name | | | | <u> </u> |
| | Number Street | | Last 4 digits of account | number: XXXX- | |
| | City | State Zip Code | | | |
| 12. | | you filed for bankruptcy, was a custodian, or another official | | possession of an assignee for the benefit o | of creditors, a court- |
| | ✓ No ☐ Yes | | | | |
| Part | | ts and Contributions | | | |
| 13. | | e you filed for bankruptcy, did | you give any gifts with a t | otal value of more than \$600 per person? | |
| | ✓ No Yes. Fill in the de | etails for each gift. | | | |
| | Gifts with a total per person | l value of more than \$600 | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom | You Gave the Gift | | | |
| | Number Street | | | | |
| | City Person's relationsl | State Zip Code hip to you | | | |
| | Person to Whom ' | You Gave the Gift | | | |
| | Number Street | | | | |
| | City Person's relations | State Zip Code hip to you | | | |

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| ebtor 1 | Dominique | Т | Jones | Case number (if known) | | |
|----------|--|---------------------------|---|----------------------------|------------------------|--------------------|
| | First Name | Middle Name | Last Name | | | |
| | | | | | | |
| Wi | thin 2 years before you f | filed for bankruptcy, di | d you give any gifts or contribution | s with a total value of mo | re than \$600 | to any charity? |
| ~ | No | | | | | |
| Ë | l Yes. Fill in the details fo | or each gift or contribut | tion. | | | |
| | | | | | -t | Value |
| | Gifts or contributions that total more than \$ | | Describe what you contribute | | ate you ontributed | Value |
| | that total more than ¢ | ,000 | | | Jiiiibatoa | |
| | OL 11 L M | | _ | - | | _ |
| | Charity's Name | | | | | |
| | - | | _ | | | |
| | Number Street | | _ | | | |
| | Number Street | | | | | |
| | City State | e Zip Code | _ | | | |
| | | | | | | |
| t 6: | List Certain Losses | | | | | |
| \A/:4 | hin 1 year hafara yay fil | lad for bankruntay or o | ince you filed for bankruptcy, did y | ou loog anything becoude | of theft fire | ather diseater or |
| | mbling? | led for ballkruptcy or si | ince you med for bankruptcy, did y | ou lose anything because | or their, iire, | other disaster, or |
| _ | | | | | | |
| ✓ | No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Describe the property | | Describe any insurance cove | | ate of your | Value of property |
| | how the loss occurred | i | Include the amount that insural pending insurance claims on lir | | oss | lost |
| | | | A/B: Property. | ie 33 of <i>Scheaule</i> | | |
| | | | 742. Freperty. | | | |
| | | | | | | - |
| ✓ | No | | or credit counseling agencies for servi | , , | | |
| | Yes. Fill in the details. | | | | | |
| | | | Description and value of any | | ate payment | Amount of |
| | | | transferred | | r transfer ras made | payment |
| | | | | VV | as illaue | |
| | Person Who Was Paid | | _ | _ | | |
| | | | | | | |
| | Number Street | | | | | |
| | | | _ | | | |
| | | | _ | | | |
| | City State | e Zip Code | | | | |
| | Email or website address | | _ | | | |
| | Littali of website address | · · | | | | |
| | | | - | | | |
| | Person Who Made the F | Payment, if Not You | | | | |
| | | Payment, if Not You | _ | | | _ |
| | Person Who Made the F | Payment, if Not You | _ | _ | | |
| | Person Who Was Paid | Payment, if Not You | _ | _ | | |
| | | Payment, if Not You | _ | _ | | |
| | Person Who Was Paid | Payment, if Not You | - - | _ | | |
| | Person Who Was Paid Number Street | | - - - | _ | | |
| | Person Who Was Paid | | - - - | _ | | |
| | Person Who Was Paid Number Street City State | e Zip Code | - - - - | _ | | |
| | Person Who Was Paid Number Street | e Zip Code | - - - | _ | | |

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| Debtor ' | Dominique | I | Jones Cas | se number <i>(if known)</i> |) | |
|----------|--|--------------------|--|-----------------------------|---------------------------------------|--------------------------------|
| | First Name | Middle Name | Last Name | | | |
| he | thin 1 year before you filed for Ip you deal with your creditor onot include any payment or tran | s or to make payme | | alf pay or transfer | any property to any | yone who promised to |
| Z | No Yes. Fill in the details. | | | | | |
| L | res. Fill III the details. | | | | | |
| | | | Description and value of any propertransferred | erty | Date payment or transfer was made | Amount of payment |
| | Person Who Was Paid | | | | | |
| | Number Street | | | | | |
| | | | | | | |
| | City State | Zip Code | | | | |
| | clude both outright transfers and d transfers that you have already No Yes. Fill in the details. | | ecurity (such as the granting of a security ent. | r interest or mortga | age on your property). | Do not include gifts |
| | | | Barriella and all and an and | B | | D. I. |
| | | | Description and value of property transferred | | y property or eceived or debts pai | Date d transfer was made |
| | Person Who Received Transfe | er | | | | |
| | Number Street | | | | | |
| | | | | | | |
| | City State Person's relationship to you | Zip Code | | | | |
| | Person Who Received Transfe | er | | | | |
| | Number Street | | | | | |
| | City State Person's relationship to you | Zip Code | | | | |
| be | thin 10 years before you filed neficiary? nese are often called asset-protec | | you transfer any property to a self-se | ettled trust or sim | ilar device of which | ı you are a |
| Z | | | | | | |
| L | 1 Co. 1 III III u le Getallo. | | Description and value of the prop | perty transferred | | Date transfer was made |
| | Name of trust | | | | | |

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Debtor 1 Dominique Jones _ Case number (if known) First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code

City

State

Zip Code

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Jones Debtor 1 Dominique __ Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code

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| Debt | | Dominique First Name | T Middle Name | Jones Last Name | Case number | (if known) | |
|------|----------|-------------------------|--------------------------------|-------------------------------|--------------------------------|------------------------------|--------------------|
| | | FIRST Name | Middle Name | Last Name | | | |
| 26. | Hav | e you been a party | y in any judicial or adminis | strative proceeding under | any environmental law? | Include settlements and orde | rs. |
| | ✓ | No | | | | | |
| | | Yes. Fill in the det | ails. | | | | |
| | | | | Court or agency | Nature | of the case | Status of the case |
| | | Case title | | | | | Pending |
| | | | | Court Name | | | On appeal |
| | | Case number | | NumberStreet | | | Concluded |
| | | | | City State | Zip Code | | |
| Part | 11: | Give Details Ab | oout Your Business or C | Connections to Any Bu | siness | | |
| 27. | With | nin 4 years before | you filed for bankruptcy, d | lid you own a business or | have any of the following | connections to any business | ? |
| | | ☐ A sole propri | etor or self-employed in a t | trade profession or other | r activity either full-time or | nart-time | |
| | | | a limited liability company | • | - | part-une | |
| | | A partner in a | | (LLO) or invited liability pa | il tilership (LLI) | | |
| | | ш . | rector, or managing execu | tive of a corporation | | | |
| | | | at least 5% of the voting or | • | ocration | | |
| | | | at least 5 70 of the voting of | equity securities of a corp | Joradon | | |
| | ✓ | No. None of the a | above applies. Go to Part 1 | 12. | | | |
| | | Yes. Check all that | at apply above and fill in th | ne details below for each b | ousiness. | | |
| | | | | Describe the natu | ire of the business | Employer Identification no | |
| | | | | | | include Social Security no | umber or IIIN. |
| | | Business Name | | | | EIN: | |
| | | Number Street | | <u> </u> | | Dates business existed | |
| | | Number Street | | Name of accounta | ant or bookkeeper | Battoo Battiilood Oxiotoa | |
| | | City | State Zip Code | | | FromTo | |
| | | | | | | | |
| | | | | | | | |
| | | | | Describe the natu | ure of the business | Employer Identification n | |
| | | | | | | include Social Security no | umber or ITIN. |
| | | Business Name | | | | EIN: | |
| | | Number Street | | | | Dates business existed | |
| | | | | Name of accounta | ant or bookkeeper | | |
| | | City | State Zip Code | | | From To | |
| | | | | | | | |
| | | | | | | | |
| | | | | Describe the natu | ire of the business | Employer Identification no | umber Do not |
| | | | | | | include Social Security no | umber or ITIN. |
| | | Business Name | | | | EIN: | |
| | | | | | | | |
| | | Number Street | | Name of accounts | ant or bookkeeper | Dates business existed | |
| | | City | State Zip Code | | | From To | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

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| Deb | tor 1 | Dominique | | T | Jones | Case number (if known) |
|------|------------|--|---------------|----------------------|------------------------------|---|
| | | First Name | | Middle Name | Last Name | |
| 28. | | hin 2 years before ditors, or other pa No Yes. Fill in the de | rties. | bankruptcy, did you | u give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| | | | | | Date issued | |
| | | - | | | W/(DD 0000/ | |
| | | Name | | | MM/DD/YYYY | |
| | | Number Street | | | | |
| | | | | | | |
| | | City | State | Zip Code | • | |
| | | la | | | | |
| Pari | 12: | Sign Below | | | | |
| 1 | true a | and correct. I und ikruptcy case can | erstand that | making a false stat | ement, concealing proper | ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | x /s/ | Dominique J | ones | | × |
| | | | ure of Debtor | | | Signature of Debtor 2 |
| | | | | | | |
| | | Date 1 | 1/11/2017 | | | Date 11/11/2017 |
| ı | Did y | ou attach additior | nal pages to | Your Statement of F | inancial Affairs for Individ | uals Filing for Bankruptcy (Official Form 107)? |
| | | lo | | | | |
| | ▝▋. | | | | | |
| l | ' | 'es | | | | |
| ı | Did y | ou pay or agree to | pay someor | ne who is not an att | orney to help you fill out b | ankruptcy forms? |
| | 7 N | lo | | | | |
| | _ | es. Name of perso | n | | | Attach the Bankruptcy Petition Preparer's Notice, |
| | Ш ' | | | | | Declaration, and Signature (Official Form 119). |

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| Fill in this information to identify your case: | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|
| Debtor 1 | Dominique | Т | Jones | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case number | | | | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral Did you claim the property What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: Retain the property and redeem it. Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Surrender the property. Creditor's No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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| Debtor | Dominique | Т | Jones | Case number (if |
|---------|--|----------------------|--------------------------|---|
| 1 | First Name | Middle Name | Last Name | known) |
| Part 2: | List Your Unexpired Person | onal Property Leas | ses | |
| informa | | ate leases. Unexpire | d leases are leases that | y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2). |
| De | scribe your unexpired personal | property leases | | Will the lease be assumed? |
| Les | ssor's name: Bronzville Realty | | | No Yes |
| | scription of leased operty: landlord | | | |
| Les | ssor's name: | | | No Yes |
| | scription of leased operty: | | | |
| Les | ssor's name: | | | No Yes |
| | scription of leased operty: | | | |
| Les | ssor's name: | | | ☐ No ☐ Yes |
| | scription of leased operty: | | | |
| Les | ssor's name: | | | No Yes |
| | scription of leased operty: | | | |
| Les | ssor's name: | | | □ No □ Yes |
| | scription of leased operty: | | | |
| Les | ssor's name: | | | □ No □ Yes |
| | scription of leased operty: | | | |
| Part 3: | Sign Below | | | |
| | er penalty of perjury, I declare perty that is subject to an unex | | my intention about any | property of my estate that secures a debt and any personal |
| × | /s/ Dominique Jones | | × | |
| _ | Signature of Debtor 1 | | _ | nature of Debtor 2 |
| C | Date 11/11/2017 MM/DD/YYYY | | Da | te 11/11/2017 MM/DD/YYYY |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| n re Dominique T Jones Ca | se No. | | | | |
|---|--|--|--|--|--|
| Debtor | (If known) | | | | |
| Ch | apter Chapter 7 | | | | |
| DISCLOSURE OF COMPENSATION OF ATTO | RNEY FOR DEBTOR | | | | |
| Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorn compensation paid to me within one year before the filing of the petition in bankruptcy rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connect | y, or agreed to be paid to me, for services | | | | |
| For legal services, I have agreed to accept | \$1,250.00 | | | | |
| Prior to the filing of this statement I have received | \$0.00 | | | | |
| Balance Due | \$1,250.00 | | | | |
| 2. The source of the compensation paid to me was: | | | | | |
| Debtor Other (specify) | | | | | |
| 3. The source of the compensation paid to me is: | | | | | |
| Debtor Other (specify) | | | | | |
| 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. | | | | | |
| I have agreed to share the above-disclosed compensation with a other person or permembers or associates of my law firm. A copy of the agreement, together with a list the people sharing in the compensation, is attached. | | | | | |
| 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspec | ts of the bankruptcy case, including: | | | | |
| a. Analysis of the debtor's financial situation, and rendering advice to the debtor bankruptcy; | in determining whether to file a petition in | | | | |
| b. Preparation and filing of any petition, schedules, statements of affairs and plan | which may be required; | | | | |
| c. Representation of the debtor at the meeting of creditors and confirmation hear | ing, and any adjourned hearings thereof; | | | | |
| 6. By agreement with the debtor(s), the above-disclosed fee does not include the following | ng services: | | | | |
| | | | | | |
| CERTIFICATION | | | | | |
| I certify that the foregoing is a complete statement of any agreement or arrangement for debtor(s) in this bankruptcy proceedings. | payment to me for representation of the | | | | |
| 11/11/2017 /s/ Michael | Miller | | | | |
| Date Signature of A | Attomey | | | | |
| Semrad Lav | v Firm | | | | |
| Name of lav | v firm | | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Jones, Dominique T | Case No. | | | |
|---------------|--------------------|---|-------------------------------------|--|--|
| | Debtor(s) | | | | |
| | | Chapter. | Chapter7 | | |
| | VERIFI | CATION OF CREDITOR MAT | RIX | | |
| T knowledg | | y that the attached list of creditors is tr | ue and correct to the best of their | | |
| Date: | 11/11/2017 | /s/ Jones, Domir Jones, Dominiqu Signature of Deb | ue T | | |

ComEd 1919 Swift Drive Oak Brook, IL, 60523

VALUE AUTO 2734 N CICERO CHICAGO, IL, 60639

FEDERAL LOAN. SERVICING PO Box 60610 Harrisburg, PA, 17106

TURNER ACCEP 4450 N WESTERN CHICAGO, IL, 60625

JVDB ASC PO Box 5718 Elgin, IL, 60121

JVDB 330 S. Wells # 1300 Chicago, IL, 60606

Rent a Center (Corporate) 5501 Headquarters Drive Plano, TX, 75024

ROBERT MORRIS COLLEG 401 S. STATE ST. CHICAGO, IL, 60605

OKINUS, INC PO Box 691 c/o Amber T. Bentley Pelham, GA, 31779

STELLAR RECOVERY INCORPORATED 4500 Salisbury Rd Ste 10 Jacksonville, FL, 32216

FIRST PREMIER BANK c/o Jefferson Capital Systems LLC PO Box 7999 c/o Linda Dold Saint Cloud, MN, 56302 CONVERGENT OUTSOURCING 10750 HAMMERLY BLVD #200 Houston, TX, 77043

AmSher Collection Services 600 BEACON PKWY W STE 30 BIRMINGHAM, AL, 35209

WEBBNK/FSTR 6250 RIDGEWOOD ROAD SAINT CLOUD, MN, 56303

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

FED LOAN SERV POB 60610 Harrisburg, PA, 17106

ACCEPTANCE NOW 6288 Dawson Blvd Norcross, GA, 30093

ROBERT MORRIS UNI-IL 401 S State Street Chicago, IL, 60605

DIVERSIFIED CONSULTANT 10550 DEERWOOD PARK BLVD JACKSONVILLE, FL, 32256

direct tv P.O. Box 78616 Phoenix, AZ, 85062

DIVERSIFIED Po Box 1391 Southgate, MI, 48195 Comcast p.o. box 196 Newark, NJ, 07101

LVNV FUNDING LLC PO Box 10587 Greenville, SC, 29603

Peoples Gas PO BOX 2968 Milwaukee, WI, 53201

PLS Loan Store 346 Commons Dr # 348 Bolingbrook, IL, 60440

City of Chicago Dept of Finance Citation Admin PO Box 5289 Chicago, IL, 60680

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| Debtor 1 Dominique First Name | T Middle Name | Jones Last Name | Case number (if known) | | | | |
|---|---|---|--|--|--|--|--|
| | estions for Reporting Purpos | | | | | | |
| ¹⁶ . What kind of debts do you have? | 16a. Are your debts primar "incurred by an individu No. Go to line 16b. ✓ Yes. Go to line 17. 16b. Are your debts primar money for a business o No. Go to line 16c. ✓ Yes. Go to line 17. | 6a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 6b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. | | | | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | ☑ No. | ter 7. Do you estimate tha | at after any exempt property o distribute to unsecured cre | | | | |
| 18. How many creditors do you estimate that you owe? | ☑ 1-49 50-99 100-199 200-999 | 1,000-5,00 5,001-10,0 10,001-25 | 000 | 25,001-50,000 50,001-100,000 More than 100,000 | | | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$10,000,0 \$50,000,0 | 1-\$10 million 01-\$50 million 01-\$100 million 001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | |
| 20. How much do you estimate your liabilities to be? | □ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | [\$10,000,0 [\$50,000,0 | 1-\$10 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | |
| Parting Sign Below | I have examined this notition | and I declare under no | naity of parity; that the in | formation provided in thus and | | | |
| For you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill | | | | | | |
| | out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ** /s/ Dominique Jones Signature of Debtor 1 Signature of Debtor 2 | | | | | | |
| | Executed on 11/11/20 | 17 DD / YYYY | Executed on | MM / DD / YYYY | | | |

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| Fill in this into | ormation to identify your ca | l s e) | | |
|---------------------------------|--|---|--|---|
| Debtor 1 | Dominique | т | Jones | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | _ |
| | | widde name | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case number | | | (Otate) | |
| (if known) | | | | Provide and the second |
| Official | Form 106Dec | <u>c</u> | | Check if this is an amended filing |
| Declara | tion About an I | ndividual Deb | tor's Schedules | 12/15 |
| If two married | people are filing togethe | r, both are equally respo | nsible for supplying correc | t information. |
| money or pro | this form whenever you fil perty by fraud in connection, 1341, 1519, and 3571. | le bankruptcy schedules on with a bankruptcy cas | or amended schedules. Ma se can result in fines up to | king a false statement, concealing property, or obtaining \$250,000, or imprisonment for up to 20 years, or both. 18 |
| Parist Sig | n Below | | | |
| Did you | pay or agree to pay some | one who is NOT an attorr | ney to help you fill out bank | ruptcy forms? |
| IZI No | | | | |
| - Voc | Name of person | | Attach Danierentou D | ntition Connected Maties Destruction and |
| LI res. | name of person | | Signature (Official Fo | etition Preparer's Notice, Declaration, and orm 119). |
| | | | | |
| | | | | |
| | | | | |

Signature of Debtor 2

MM/DD/YYYY

Date

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and

that they are true and correct.

/s/ Dominique Jones (Signature of Debtor 1

Date 11/11/2017

MM/DD/YYYY

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| Debtor | r 1 Dominique | T | Jones | Case number (if known) |
|--------|---------------------------|--|--|---|
| | First Name | Middle Nar | ne Last Name | |
| 28. V | reditors, or othe | efore you filed for bankrup er parties. | tcy, did you give a financial | statement to anyone about your business? Include all financial institutions, |
| Ľ | ☑ No ☑ Yes. Fill in th | e details below. | | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | ··············· |
| | Number St | reet | The state of the s | |
| | City | State Zip | Code | |
| Part 1 | a Sign Belov | V | | |
| tru | e and correct. I | understand that making a | false statement, concealing | attachments, and I declare under penalty of perjury that the answers are g property, or obtaining money or property by fraud in connection with or up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | × | /s/ Dominique Jones | | * |
| | S | ignature of Debtor 1 | many of the | Signature of Debtor 2 |
| | D | ate 11/11/2017 | Ψ. | Date 11/11/2017 |
| Did | l you attach add | litional pages to Your Stat | ement of Financial Affairs t | or Individuals Filing for Bankruptcy (Official Form 107)? |
| 区 | No Yes | | | |
| Did | l you pay or agre | ee to pay someone who is | not an attorney to help you | fill out bankruptcy forms? |
| তা | No | | | |
| | Yes. Name of p | erson | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Debtor Dominique | T | Jones | Case number (if |
|--|--|---|--|
| First Name | Middle Name | Last Name | known) |
| List Your Unexpired | i Personal Property Leas | es | |
| or any unexpired personal pro | operty lease that you listed in | n Schedule G: Executory I leases are leases that | y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2). |
| Describe your unexpired p | the state of the s | | Will the lease be assumed? |
| Lessor's name: Bronzville F | Realty | | No Yes |
| Description of leased property: landlord | | | Boseval |
| Lessor's name: | alant I alan bir a san Pari Jahan ya kapara ya panga ya ka aranga a tanga a tanga a tanga a ka aranga a ka ara Ka aranga a ka | and a process to the process of the | No Yes |
| Description of leased property: | | | |
| Lessor's name: | | | ☐ No ☐ Yes |
| Description of leased property: | | | in the second se |
| Lessor's name: | | | No Tyes |
| Description of leased property: | | | |
| Lessor's name: | | | No Yes |
| Description of leased property: | | | |
| Lessor's name: | | | ☐ No ☐ Yes |
| Description of leased property: | | | |
| Lessor's name: | | | No TYes |
| Description of leased property: | | | Bosond |
| Sign Below | | | |
| Under penalty of perjury, I de property that is subject to a | eclare that I have indicated in unexpired lease. | my intention about any p | property of my estate that secures a debt and any personal |
| X /s/ Dominique Jones Signature of Debtor 1 | James John | X Sigr | nature of Debtor 2 |
| Date 11/11/2017 MM/DD/YYYY | * | Date | e 11/11/2017 MM/DD/YYY |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Jones, Dominique I | Case No. | ······ |
|-----------------|--------------------|---|-------------------------------------|
| | Debtor(s) | Chapter. | Chapter7 |
| | VERIF | ICATION OF CREDITOR MAT | RIX |
| TI knowledge | | rify that the attached list of creditors is tru | ue and correct to the best of their |
| Date: | 11/11/2017 | /s/ Jones, Domin Jones, Dominiqu Signature of Deb | eT V/ |

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| Debtor 1 | Dominique First Name | Т | Jones | Case number | ∃r <i>(if known)</i> | · · · · · · · · · · · · · · · · · · · | *************************************** |
|---|--|--|--|-------------------------------|----------------------|--|---|
| | First Name | Middle Name | Last Name | Column A Debtor 1 | | Column B Debtor 2 or non-filing spous | \$e |
| Do no | | nsation if you contend that the amou Act. Instead, list it here: | | \$ <u>0.00</u> | | \$0.00 | |
| For yo | our spouse | | \$0.00 \$0.00 | | | | |
| | on or retirement i | income. Do not include any a Security Act. | amount received that was | a \$0.00 | | \$0.00 | de d'Allendaure |
| 10. inco amou paym intern | me from all other int. Do not include a ents received as a v | sources not listed above. S any benefits received under the dictim of a war crime, a crime terrorism. If necessary, list of | ne Social Security Act or against humanity, or | • | | | |
| Other | Government Assist | tance | | \$632.00 | | \$0.00 | |
| Total | amounts from sepa | arate pages, if any. | | +\$0.00 | - I | +\$0.00 | |
| 11. Cale | culate your total o | current monthly income. Ad | d lines 2 through 10 for | \$2,122.39 | + | \$2,654.23 | \$4,776.62 |
| colu | ımn. Then add the | total for Column A to the total | l for Column B. | | | | |
| | *** * | | | | | | Total current monthly income |
| | | ether the Means Test Ap t monthly income for the ye | | | | | |
| | - | ent monthly income from line | • | | Copy line | 11 here → | \$4,776.62 |
| ı | Multiply by 12 (the | number of months in a year). | | | | | X 12 |
| 12b. T | The result is your ar | nnual income for this part of t | he form. | | | 1 | 12b. \$57,319.44 |
| 13 Calou | ulata the madian f | amily income that applies t | a von Follow those stan | o: | | | |
| | | | Illinois | 5 . | | | |
| | the state in which y | | 5 | , | | | |
| | | ple in your household. | *************************************** | v = 100 | | | |
| Fill in house | | ncome for your state and size | of | | | | 13. \$102,872.00 |
| | | e median income amounts, gi . This list may also be availabl | | | | | |
| 14. How | do the lines comp | pare? | | | | | |
| 14a. | Line 12b is less Go to Part 3. | than or equal to line 13. On | the top of page 1, check | box 1, There is no presump | tion of abi | use. | |
| 14b. | Line 12b is mo Go to Part 3 an | re than line 13. On the top of d fill out Form 122A-2. | page 1, check box 2, Th | e presumption of abuse is d | etermined | by Form 122A-2 | |
| Part 3: | Sign Below | | | | | | |
| | | | | | | | TANCAN TO THE TOTAL CONTROL OF THE TANCE OF |
| By si | gning here, I declar | re under penalty of perjury tha | t the difformation on this: | statement and in any attachi | nents is tr | ue and correct. | |
| | | (N) ·- | 1 | 4.0 | | | |
| | /s/ Dominique Joi ignature of Debtor | The state of the s | Jan | Signature of Debtor 2 | | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | |
| | | · | re-re ^{res} | | | | |
| D | MM/DD/YYYY | - | | Date 11/11/2017 MM/DD/YYYY | | | |
| | | a, do NOT fill out or file Form | | | | | |

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re | Dominique T Jones | | | Case No. | | | | |
|-------------|--|-----------------------|---|-------------------------------------|-----------------------------|--|--|--|
| | Debtor | | | | (If known) | | | |
| | | | | Chapter | Chapter 7 | | | |
| | DISCLOSURE OF C | OMPENSA | TION OF ATT | ORNEY F | OR DEBTOR | | | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fe compensation paid to me within one y rendered or to be rendered on behalf or | ear before the filing | of the petition in bankri | intox or agreed to | the naid to me for convices | | | |
| | For legal services, I have agreed to acc | ept | | | \$1,250.00 | | | |
| | Prior to the filing of this statement I ha | ve received | | | \$0.00 | | | |
| | Balance Due | | | | \$1,250.00 | | | |
| 2. | The source of the compensation paid t | o me was: | | | | | | |
| | Debtor | Other (s | pecify) | | | | | |
| 3. | The source of the compensation paid t | o me is: | | | | | | |
| | ✓ Debtor | Other (s | pecify) | | | | | |
| 4. | 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. | | | | | | | |
| | I have agreed to share the above-d members or associates of my law f the people sharing in the compens | irm. A copy of the a | tion with a other person greement, together with | or persons who a a list of the name | re not s of | | | |
| 5. | In return for the above-disclosed fee, I | have agreed to rend | er legal service for all as | pects of the bankr | ruptcy case, including: | | | |
| | a. Analysis of the debtor's financi- bankruptcy; | | | | | | | |
| | b. Preparation and filing of any pe | tition, schedules, st | atements of affairs and | plan which may be | e required; | | | |
| | c. Representation of the debtor at | the meeting of crec | litors and confirmation h | nearing, and any a | djourned hearings thereof; | | | |
| 6. | By agreement with the debtor(s), the ab | ove-disclosed fee c | loes not include the follo | owing services: | | | | |
| | | | | | | | | |
| | | CER | TIFICATION | | | | | |
| l debto | certify that the foregoing is a complete sor(s) in this bankruptcy proceedings. | statement of any ag | reement or arrangement | for payment to me | e for representation of the | | | |
| | 11/11/2017 | | /s/ Mich | ael Miller | | | | |
| | Date | | Signature | of Attorney | | | | |
| | Notice to the state of the stat | | Semrad | Law Firm | | | | |
| | | _ | Name o | of law firm | | | | |



CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,250.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

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As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 11/11/2017

Client

Client

Attorne